

<i>SERFF Tracking Number:</i>	<i>HULI-125856152</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Heritage Union Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>40599</i>
<i>Company Tracking Number:</i>	<i>HU-E1-08</i>		
<i>TOI:</i>	<i>L04I Individual Life - Term</i>	<i>Sub-TOI:</i>	<i>L04I.213 Specified Age or Duration - Fixed/Indeterminate Premium - Single Life</i>
<i>Product Name:</i>	<i>LF65 and LS 3/5</i>		
<i>Project Name/Number:</i>	<i>Name Change Endorsement/HU-E1-08</i>		

Filing at a Glance

Company: Heritage Union Life Insurance Company

Product Name: LF65 and LS 3/5

SERFF Tr Num: HULI-125856152

State: ArkansasLH

TOI: L04I Individual Life - Term

SERFF Status: Closed

State Tr Num: 40599

Sub-TOI: L04I.213 Specified Age or Duration -

Co Tr Num: HU-E1-08

State Status: Approved-Closed

Fixed/Indeterminate Premium - Single Life

Filing Type: Form

Co Status: Submitted

Reviewer(s): Linda Bird

Author: Kim Hiar

Disposition Date: 10/23/2008

Date Submitted: 10/17/2008

Disposition Status: Approved

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name: Name Change Endorsement

Project Number: HU-E1-08

Requested Filing Mode: Review & Approval

Status of Filing in Domicile: Not Filed

Date Approved in Domicile:

Domicile Status Comments: The Name Change
Endorsement is not required to be filed in
Arizona.

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact:

Group Market Type:

Filing Status Changed: 10/23/2008

State Status Changed: 10/23/2008

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

Enclosed is the Name Change Endorsement that will be used to notify our existing policyholders of the recent redomestication and name change of Annuity & Life Reassurance America, Inc. to Heritage Union Life Insurance Company.

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<i>Company Tracking Number:</i>	<i>HU-E1-08</i>		
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<i>Project Name/Number:</i>	<i>Name Change Endorsement/HU-E1-08</i>		

I have enclosed a copy of the Previously Approved Forms List. The forms have been divided into two categories; Active and Inactive. Only the “active” policy forms and other forms are currently being marketed in Arkansas. The “inactive” forms are no longer available for issuance in Arkansas. The Name Change Endorsement is being filed for general use so that it may be used with all forms included in this list. Upon approval of the Name Change Endorsement, it will be mailed to all existing policyholders within 30 days of such approval.

It is our intent to incorporate the new name into the “active” forms for future use. There will be absolutely no other changes, other than to the company name.

Company and Contact

Filing Contact Information

Kim Hiar, Compliance Manager	kimberly.hiar@heritageunion.com
1805 Monument Avenue	(804) 212-2818 [Phone]
Richmond, VA 23220	(804) 213-0051[FAX]

Filing Company Information

Heritage Union Life Insurance Company	CoCode: 62421	State of Domicile: Arizona
1805 Monument Avenue	Group Code: 181	Company Type: Life & Health Insurer
Suite 201		
Richmond, VA 23220	Group Name:	State ID Number: 2058
(804) 212-2818 ext. [Phone]	FEIN Number: 41-0880965	

Filing Fees

Fee Required?	Yes
Fee Amount:	\$20.00
Retaliatory?	No
Fee Explanation:	
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
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Heritage Union Life Insurance Company	\$20.00	10/17/2008	23268144

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<i>Project Name/Number:</i>	<i>Name Change Endorsement/HU-E1-08</i>		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Linda Bird	10/23/2008	10/23/2008

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<i>Project Name/Number:</i>	<i>Name Change Endorsement/HU-E1-08</i>		

Disposition

Disposition Date: 10/23/2008

Implementation Date:

Status: Approved

Comment:

Rate data does NOT apply to filing.

<i>SERFF Tracking Number:</i>	<i>HULI-125856152</i>	<i>State:</i>	<i>Arkansas</i>
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Item Type	Item Name	Item Status	Public Access
Supporting Document	Certification/Notice		Yes
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Previously Approved Forms List		Yes
Form	Name Change Endorsement		Yes

SERFF Tracking Number: HULI-125856152 State: Arkansas

Filing Company: Heritage Union Life Insurance Company State Tracking Number: 40599

Company Tracking Number: HU-E1-08

TOI: L041 Individual Life - Term Sub-TOI: L041.213 Specified Age or Duration - Fixed/Indeterminate Premium - Single Life

Product Name: LF65 and LS 3/5

Project Name/Number: Name Change Endorsement/HU-E1-08

Form Schedule

Lead Form Number: HU-E1-08

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	HU-E1-08	Certificate	Name Change	Initial		43	HU-E1-08
		Amendmen	Endorsement				NameandRed
		t, Insert					omesticationE
		Page,					ndorsement.d
		Endorseme					oc
		nt or Rider					

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Attachment "HU-E1-08 NameandRedomesticationEndorsement.doc" is not a PDF document and cannot be reproduced here.

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Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: HULI-125856152 State: Arkansas
Filing Company: Heritage Union Life Insurance Company State Tracking Number: 40599
Company Tracking Number: HU-E1-08
TOI: L041 Individual Life - Term Sub-TOI: L041.213 Specified Age or Duration -
Fixed/Indeterminate Premium - Single Life
Product Name: LF65 and LS 3/5
Project Name/Number: Name Change Endorsement/HU-E1-08

Supporting Document Schedules

Review Status:

Satisfied -Name: Certification/Notice 10/13/2008
Comments:
Attachment:
Certification of Compliance HU-E1-08.pdf

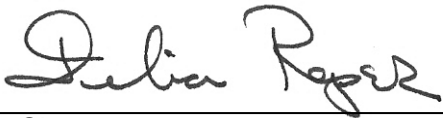
Review Status:

Satisfied -Name: Previously Approved Forms List 10/17/2008
Comments:
Attachments:
CERTIFICATION OF COMPLIANCE.pdf
PREVIOUSLY APPROVED FORMS LIST.pdf

CERTIFICATION OF COMPLIANCE

I certify that in preparation of this filing all statutes, regulations, rules and bulletins have been reviewed, including Rule 19 and Rule 49.

I also certify that all forms contained in this filing comply with the minimum flesch score of 40 as required in Arkansas ACA 23-80-206.



Signature

October 15, 2008

Date

Julie Roper

Name

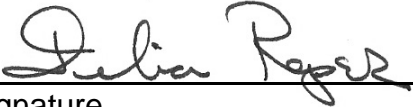
President

Title

CERTIFICATION OF COMPLIANCE

I certify that the active forms listed on the attached Previously Approved Forms List remain in compliance with the laws and regulations with the State of Arkansas.

Upon approval of the Name Change Endorsement, it will be mailed to all existing policyholders within 30 days of such approval.



Signature

October 15, 2008

Date

Julia B. Roper

Printed Name

President

Title

PREVIOUSLY APPROVED FORMS LIST
ARKANSAS

ACTIVE POLICY FORMS:

<u>STATE</u>	<u>FORM NUMBER</u>	<u>TYPE</u>	<u>APPROVAL DATE</u>
AR	AL-TL-POL300B-AR	Term Life Insurance	4/7/2008
AR	AL-TL-POL101B-AR	Term Life Insurance	6/4/2008

OTHER FORMS USED:

<u>STATE</u>	<u>FORM NUMBER</u>	<u>TYPE</u>	<u>APPROVAL DATE</u>
AR	AL-TL-SCH300A-AR	Policy Schedule	4/7/2008
AR	AL-TL-SCH101A-AR	Policy Schedule	6/4/2008
AR	AL-TL-APP310A.01	Application	4/7/2008
AR	AL-TL-APP110A.01	Application	4/7/2008
AR	AL-TL-APP101A.01	Application	6/4/2008
AR	AL-TL-CBS300A	Cost & Benefit Statement	4/7/2008
AR	AL-TL-CBS101A	Cost & Benefit Statement	6/4/2008
AR	AL-TL-APP100A	Application Overflow	4/7/2008
AR	AL-TL-AMD400	Amendment	4/7/2008
AR	AL-TL-APP300	Reinstatement Application	4/7/2008
AR	AL-TL-REP100A	Replacement Notice	4/7/2008
AR	AL-TL-RPL200A	Replacement Notice	4/7/2008
AR	AL-TL-REP300A	Replacement Notice	4/7/2008

INACTIVE POLICY FORMS (Previously approved under Capitol Bankers Life):

<u>STATE</u>	<u>FORM NUMBER</u>
AR	IS2-8704